

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



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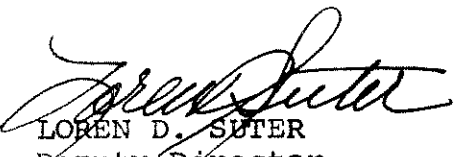
ALL-COUNTY INFORMATION NOTICE I- 73-84

TO: ALL COUNTY WELFARE DIRECTORS
ALL CHIEF PROBATION OFFICERS

SUBJECT: EMERGENCY RESPONSE AND FAMILY MAINTENANCE PROGRAMS

The State Department of Social Services completed a series of regional training workshops on the application of Division 30 regulations relative to the Emergency Response and Family Maintenance programs. As stated in the workshop sessions, the attached addresses a list of questions and answers that were raised during the workshops.

Should you have any questions, please contact your Adult and Family Services Program Management Consultant at (916) 445-0623 or ATSS 485-0623.


LOREN D. SUTER
Deputy Director
Adult and Family Services Division

Attachment

cc: CWDA

EMERGENCY RESPONSE (ER) QUESTIONS

ER AS POINT OF ENTRY INTO THE CWD

- Ques. 1: Is it true that all children new to child welfare services must go through the ER program?
- Ans.: Yes. As of October 1, 1983, the ER program is to be considered the point of entry into child welfare services for any child reported to be endangered by abuse, neglect, or exploitation (W&I Code 16504; MPP 30-110.1).
- Ques. 2: Is it necessary for all requests to enter through ER, i.e., residence verification, nonrelated guardian applying for AFDC-FC, courtesy supervision, home studies, ICPC and guardianship studies, etc.?
- Ans.: No. ER only addresses response to reports/referrals of abuse, neglect, exploitation. Direct other types of inquiries, requests to the appropriate service program for response (W&I Code 16504; MPP 30-132).

RESPONSE TO REQUESTS AND REFERRALS

- Ques. 3: Are CWDs mandated to have face-to-face contact in situations of unrelated molest (i.e., A child is molested by a stranger. The child's home is considered safe and is not in question. The incident is being handled as a criminal matter but police refer to the CWD because of information needs and child abuse reporting requirements).
- Ans.: No. MPP 30-002(a) defines abuse as "injuries against the child by or allowed by person(s), guardian(s), or other person(s) in whom the court has vested care, custody, and control of the child.
- However, when a person who has care, custody and control "...causes or permits the person or health of the child..." to be at risk, then a face-to-face contact is required (Penal Code Section 11165d).
- Ques. 4: Must CWDs accept the reporter's definition of neglect and make an ER response though the CWD may not consider the situation one of neglect? For instance, a reporter alleges that a divorced father leaves his 14-year-old child alone every day for several hours. The reporter considers the situation one of neglect--the CWD does not. However, since the report is made, must the CWD make an ER response?
- Ans.: No. It is the responsibility of the county to determine whether a report meets definitions of abuse, neglect, exploitation as defined in, respectively, MPP 30-002(s), 30-002(a) and 30-002(i). In the described example, if the CWD determines that the situation described does not fall within the definition of neglect, an ER response is not required.
- Ques. 5: Will the state develop guidelines to provide specific direction on what constitutes an immediate response, a three-day and a ten-day response time?

- Ans.: No. MPP 30-132.21, .22 and .23 clearly identifies standards to determine what constitutes an immediate response, a three-day and a ten-day response.
- Ques. 6: When a county gets a law enforcement request to respond to situations of general neglect, are they to respond within three days or ten days?
- Ans.: Response should be within ten calendar days. MPP 30-132.22 states that response to allegations of general neglect shall be made within ten calendar days.
- Ques. 7: Are you saying that CWDs can no longer reject (screen) cases and prioritize? CWDs cannot handle all reports/allegations.
- Ans.: Yes. W&I Code 16504 specifically places responsibility on CWDs to respond to all reports of abuse, neglect, exploitation in accord with departmental regulations.
- However, the only screening CWDs may do is in relation to those reports which do not meet MPP 30-002's definitions for neglect, abuse, exploitation.
- Ques. 8: Do regulations require that the social worker see all children on a face-to-face contact in general neglect situations?
- Ans.: Yes. MPP 30-132.23, supported by W&I Code 16504, requires an in-person response for all children in general neglect situations.
- Ques. 9: If the initial response on a complaint results in no contact with the family, how soon and how frequently must continuing attempts be made for the face-to-face contact?
- Ans.: There are no set guidelines for frequency of attempts in making face-to-face contact. The purpose of a face-to-face contact, as part of MPP 30-134 requirements for initial evaluation, is to determine whether a child is at risk. CWDs must make every effort to investigate this situation. However, when there are situations where repeated attempts at face-to-face contact are unsuccessful (i.e., speculation is that the family has moved out of the county), then the CWD must document its attempts and maintain this documentation for at least three years (MPP 30-134.51).
- Ques. 10: Since there is no allowance for screening, what are the state's expectations on referrals in which, for instance, a mentally ill grandmother repeatedly makes referrals on abuse of her grandchildren. Initial investigation does not support the referral yet the grandmother continues to make repeated reports. Must the CWD respond to all her reports?
- Ans.: 1) If the question, "Must the CWD respond to all her reports" means, "Must the CWD make face-to-face response to all the grandmother's reports after it has documented that these

reports are not credible or valid", the answer is no. In situations such as the one described in this question, the state's expectations are:

- a) The CWD must evaluate all reports to determine whether the reports meet MPP 30-002's definitions for abuse, neglect, exploitation.
- b) If the CWD determines that the report meets MPP 30-002's standards, then a response and initial evaluation must be made in accord with MPP 30-132 and MPP 30-134, respectively.
- c) If the CWD determines the report does not meet MPP 30-002's standards, then a face-to-face contact is not required but the CWD must be able to support and document its decision. Though a case record need not be opened for these reports, documentation must be maintained in the office.

Ques. 11: How are CWDs expected to handle situations where the alleged report/referral happened six months ago? In this situation, what is the response time? Or is a response even necessary?

Ans: The social worker receiving the alleged report is responsible for eliciting information from the referent concerning the nature of the allegation. Based on MPP 30-132 the nature of the allegation--not when the allegation took place--determines the response time.

Ques.12 When a police child abuse unit is involved, why does the CWD have to respond?

Statutes and regulations require the CWD to respond to all reports alleging abuse, neglect exploitation (W&I Code 16504 and MPP Section 30-132 respectively). The purpose of the CWD response is to determine:

- a) Whether a child is at risk, and
- b) What types of social services would best serve and protect the child (MPP 30-132.11 and .12). Presumably, the primary function of a police abuse unit is to investigate the potential criminal aspects of the allegation.

Ques. 13: When law enforcement places in an emergency shelter care (their decision), what is the CWD's response time to be? Should the CWD even be involved in making a response because the foster home will be disrupted within a relatively short period of time (i.e., the police place the child in the home; then a social worker sees the child in the home)?

Ans.: The CWD's response time is not determined by the fact that law enforcement has placed a child in a foster home. Based on MPP 30-132.1, the response time is based on the nature of the allegation. The CWD is required by MPP 30-132.12 to determine if CWS services are necessary and to provide or arrange for social services.

Ques. 14: Does general neglect include those children who are truants, i.e., not in school? The reason for this question is that some schools want CWDs to consider lack of school attendance the same as lack of supervision--therefore, general neglect.

Ans.: General neglect is defined in MPP 30-132.211(a)(1). There is nothing express in the regulations which indicates that lack of school attendance, in itself, constitutes general neglect.

Ques. 15: The issue of not allowing use of law enforcement to make the initial face-to-face contact creates a real problem for small remote counties. Often, there is only one social worker, long distances involving two-three hours to make a response, severe weather conditions, etc., which create problems in making timely ER responses. Such counties must rely on law enforcement for occasional emergency calls. Will the state allow exception when circumstances are justifiable?

Ans.: The state must assure that SB 14's intent is met. SB 14 specifically requires a CWD social worker to make the initial face-to-face contact (W&I Code 16504). The only allowable alternative is for small, remote counties to establish an emergency response unit in cooperation with neighboring counties (MPP 30-192.1).

PROBATION/CWD/FEDERAL JURISDICTION

Ques. 16: In some counties, probation handles court-related matters. New ER regulations sound like the CWD social worker must make the response. However, since the referral goes to probation, must the social worker make the response as the case will be handled by probation?

Ans.: W&I Code 16500, 16501 and 16504 specifically places responsibility with CWDs to make the ER response and to perform initial intake services. Therefore, the social worker must make the initial response and perform intake functions as specified by MPP 30-132 and MPP 30-134. Additionally, the statement that "the referral goes to probation" suggests another problem. MPP Section 30-194.12 clearly prohibits probation agencies from providing telephone answering services for child abuse or neglect referrals and W&IC Section 16504 requires the CWD to maintain and operate a 24-hour emergency response system.

Ques. 17: If a county has no jurisdiction over allegations or reports of abuse, neglect, etc., which occur at a military installation, what are the state's expectations of CWDs in making ER response when there is an issue of governmental jurisdiction involved?

Ans.: The Federal Government has jurisdiction over military installations and is responsible for law enforcement. Many military installations, however, have agreements with local CWDs for child welfare services which permit the social worker to make an emergency response at a military installation.

OTHER ER QUESTIONS

Ques. 18: Why is an assessment and service plan required in ER (since the intent of ER is to transfer the case as soon as possible)?

Ans.: The purpose of the ER assessment and service plan is to provide information to substantiate that a child is at risk (MPP 30-198.13); to assess whether a child can safely remain at home (30-198.13); and to determine what immediate services are needed and which child welfare service program would be in the best interest of the child (30-198.14). The sum total of this information will direct transfer of the child to the appropriate service program and, additionally, can serve as a foundation for the assessment/service plan required by the transfer program.

Ques. 19: Why can't an ER case be transferred to FM prior to disposition?

Ans.: This assumes a dependency has been filed. There is no statutory or regulatory authority to transfer a dependency case from ER to FM prior to disposition. If it was necessary to remove and detain the child, the child's safety could be endangered by a return home prior to disposition. However, if it were determined that the child could safely remain in the home with the provision of services, the CWD could offer the parents voluntary Family Maintenance Services.

Ques. 20: Are placements made in ER subject to the sliding fee scale?

Ans.: No. The CWD must use the sliding fee scale to compute parental reimbursement for voluntary F.R. services only. (MPP 30-364.)

Ques. 21: Do you need a court order to provide Family Reunification services prior to disposition?

Ans.: No. MPP 30-170.111 allows transfer to FR prior to disposition. MPP 30-174.13 states that FR services are to be provided pending adjudication when the social worker determines that ER or FM services are not adequate to meet the protective needs of the child. If parents agree and when FR services are provided prior to disposition, the CWD should be aware that the court may order the child's case to be transferred to a different child welfare services program at the time of the dispositional hearing.

Ques. 22: A child in the ER program is eligible for Family Reunification services after detention. The parents have agreed to these services. What program is the child in, ER or FR? How should time be claimed?

Ans.: The child would be in FR (see Answer #21) and time would be claimed under the FR service program.

Ques. 23: Is use of out-of-home respite care precluded in ER?

Ans.: No. ACL 83-121 allows, without prior DSS approval, use of any service-funded activity as long as a county satisfies the requirement of having available all mandated child welfare service-funded activities by specific programs.

Ques. 24: The term "exploitation" is not on SOC 291. Do we record instances of exploitation as "others" on the SOC 291? Also, where do we find a definition of exploitation?

Ans.: Exploitation is to be recorded as "others" on the revised SOC 291. The definition of exploitation is to be found in MPP 30-002(i).

Ques. 25: Can a clerk or person other than the social worker complete the SOC 291?

Ans.: Yes.

Ques. 26: If the service plan is due ten days after the initial response and the case is to be closed or transferred within five days of completion of services, how long can the child be in ER?

Ans.: For all court dependents the service plan is to be completed within ten calendar days of the initial response (MPP 30-144.1). Unless adjudication and/or disposition is pending, the case must be closed or transferred to another service program within five calendar days of service plan completion (MPP 30-170.11). If adjudication and/or disposition is pending the case remains open until the court orders transfer or closure. If the court orders transfer to another service program the CWD has five calendar days to transfer the case.

For noncourt dependents a service plan shall be developed and services shall be initiated within ten calendar days of the initial response (MPP 30-144.1). After completion of the service plan, the CWD has five calendar days to close the case or transfer the case to another services program (MPP 30-170.11).

Ques. 27: While developing a service plan, can the social worker recommend 21 days of ER service and then transfer to FM?

Ans.: No. The purpose of the ER service plan is to:

- a) Determine what services are needed for a child, and
- b) Make a disposition of transfer or closure of the child's case (MPP 30-198.14(a)(b)). In relation to service time limits, see Answer #27.

Ques. 28: Will a detention facility such as MacLaren Hall qualify for an exception to the seven-day ER face-to-face contact requirements?

Ans.: No. For a child receiving ER services and who is detained in a county operated group shelter care facility (such as MacLaren Hall), the case-carrying ER social worker must have a face-to-face contact with the child every seven days (MPP 30-162.11).

Ques. 29: In a county that has a dual system where the probation officer does the intake, it is difficult for the CWD to become involved under the current system. What are the state's expectations when the CWD does not have control over all aspects of service delivery, i.e., when a child is placed in a detention unit, the child is not under control of the CWD?

Ans.: As of October 1, 1983, CWDs are responsible to maintain and operate a 24-hour ER system, which includes providing in-person responses in accordance with Division 30 (ER) Departmental Regulations (W&I Code 16504). Those CWDs which do not provide an Emergency Response program in accord with Departmental Regulations are considered to be out-of-compliance and subject to SDSS compliance actions.

FAMILY MAINTENANCE QUESTIONS

PROGRAM TIME FRAMES

Ques. 1: What are the program time limits for 360s? Can 330s and 360s be treated the same? Can you elaborate more on 360s, what are these cases? Are court petitions involved? Are these cases calendared by the court? Are there court reviews?

Ans.: The program time limits are the same for all children receiving FM services (W&I Codes 360 and 330) (see FM Question #1). The CWD may provide child welfare services in the home with the consent of the minor's parent or guardian in lieu of filing a petition or subsequent to dismissal of a petition already filed (W&I Code 330). The juvenile court may order child welfare services in the home without adjudicating the minor a dependent (W&I Code 360(a)).

FM SERVICE PROGRAM PROVISIONS

Ques. 2: If a voluntary case is closed because of noncooperation of the family, then two days later, a new referral of abuse is made, what should the county do?

Ans.: The CWD should treat the referral as an ER call and, if appropriate, file a petition for dependency.

Ques. 3: What is expected of CWDs when the family will not accept voluntary FM services, and the allegation cannot support a dependency petition? What options are there for this family?

Ans.: In this type of situation, the family leaves the CWD with only the option of offering a referral to an appropriate community resource (i.e., mental health, a parent support group, Family Services, etc.). As long as the family will not accept voluntary FM services, and the allegation is insufficient to support a dependency petition, there is no basis to support continued CWD intervention. The CWD should document the offer of services for future reference.

FM SERVICE PLAN

Ques. 4: Social workers are not required to sign the FM service plan. What if in the future there is a need to know what social worker developed the service plan? How can that social worker be identified?

Ans.: The method used to identify the specific social worker who has developed the FM service plan is considered a CWD procedure. The identity of the social worker is usually found with the other case identifying information in the service plan.

Ques. 5: Can a separate service agreement which is signed by the parent meet the service plan requirement for parental signature?

Ans.: Yes. As long as the separate service agreement meets service plan requirements. The purpose of parental signature is to indicate service plan approval and willingness to participate in service

activities (MPP 30-234.42). The service agreement addresses specific expectations and levels of parental and agency participation agreed upon by the parent and agency.

Ques. 6: Can a 330 agreement that is signed by the parent be considered the same as a signed service plan?

Ans.: An agreement completed in accord with W&I Code Section 330 and signed by the parent could be considered a signed service plan as long as it contains all service plan information required by MPP 30-276.141(a)(b)(c).

Ques. 7: Parents receive both a notice and a copy of the court report which contains the service plan and the assessment. Given that parents have this information, what is the reason for requiring parental signature?

Ans.: The reason for requiring parental signature is to document that the parent(s) has read the service plan and is willing to participate in the service plan objectives.

OTHER FAMILY MAINTENANCE QUESTIONS

Ques. 8 When children are transferred from ER to FM, is parental consent required?

Ans.: Parental consent is required when the family is receiving services as a voluntary FM case (MPP 30-172.12). Also, parental consent is required for those families subject to W&I Code 330. For court-ordered dependents, no parental consent is required.

Ques. 9: A child is detained. At the disposition, the child is returned home. Foster Care is held in abeyance. Is this an FM case?

Ans.: If the court orders the child returned home to receive FM services, the case becomes an FM case.

OTHER QUESTIONS

Ques. 1: Can day care licensed homes be used for respite care?

Ans.: With the implementation of SB 14, there is no longer a service-funded activity called respite care. Respite care has been replaced with "out-of-home respite care." The definition for this new service-funded activity is in MPP 30-002(z)(6). Out-of-home respite care is the use of prearranged care in residential settings (provides 24-hour care) other than the child's home and cannot be used for routine child day care purposes. Child day care is funded and administered by the State Department of Education.

Ques. 2: In FM, if a child remains with the nonabusing parent and the abusing parent is in jail, does the social worker have to see the incarcerated parent?

Ans.: No. FM services are geared towards the parent who is in the family home. Regulations represent minimal requirements (MPP 30-252.2). The decision to see the incarcerated parent should be a casework decision. However, if the social worker decides not to visit the incarcerated parent, it is recommended as sound casework practice that the social worker document in the case record the basis for this decision.

Ques. 3: Say a parent wants to visit his/her child, who is placed in an out-lying area, twice a month. The parent has no transportation and the CWD is unable to provide transportation. The foster home is located three to four miles from the bus stop. Can the CWD limit the service plan to monthly visits instead of fortnightly visits?

Ans.: MPP 30-342.32 requires, as a minimum, monthly face-to-face contacts between the child and parent. As good practice, it is recommended that the parents be supported in their desire to visit the child more frequently. Transportation is a service-funded activity which must be available to all children and their families receiving family reunification program services. (MPP 30-320.15)

Ques. 4: If each child is being seen as a "case", may services on one child in the family be terminated while we continue to keep the case open for another child in the family? Or are we responsible for supervising all kids in a family as long as services are required for any one of them?

Ans.: The CWD is only responsible for supervising the child that has an open case. Supervision includes face-to-face contact for children receiving ER and FM services (MPP 30-162; MPP 30-252). Services may be terminated on one child and kept open for the other child in the same family.

Ques. 5: Can a services aide be used to meet the social worker visitation requirements in ER or FM?

Ans.: Yes, in part. Case aides may be considered social service staff (MPP 30-162.111(c)(2)(A) and MPP 30-252.111(b)(1)). However, when case aides are used, the ER social worker is required to have face-to-face contact once every 15 days--as opposed to once every seven calendar days; or the FM social worker is to have face-to-face contact at least once every 30 days.

Ques. 6: When the CWD is concerned about siblings of a child in PP, and there is no allegation of abuse, neglect, exploitation, may home calls be made and claimed against OCSS funds?

Ans.: No. If the social worker feels that services are required, the social worker should make an ER referral to determine if a case should be opened on the siblings.

Ques. 7: Is a stepparent considered part of the family when making a determination of fee (FR Sliding Fee Scale)?

Ans.: If the stepparent adopts the child, the stepparent's income is to be used in determination of the FR sliding fee scale. If the stepparent has not adopted the child, the stepparent's income is not to be used. Instead, use the income of the child's parent(s). (MPP 30-302(g); W&I Code 16507.)

FM POLICY CLARIFICATION

Ques. 1: Can the CWD provide voluntary Family Maintenance (FM) Services to parents who refuse to sign the service plan.

Ans.: Yes. MPP Section 30-234.42 requires that the CWD request the parent to sign the service plan. If the parent refuses to sign the plan, MPP Section 30-234.421 requires the CWD to document in the case record the reason for the parent's failure to sign and to provide FM Services.

In ACL 84-07, FM Question 8, DSS answered this question by requiring a parental signature on the voluntary FM plan in order to receive services. Although desirable from a program policy standpoint, this requirement has been determined to be not supportable by existing statutory authorities. Therefore, the prior answer to this question found in ACL 84-07 should be disregarded.